ISSUE SI IP STAPLI, AREA (for additional cross references)

POSITION INITIALS ID NO. DATE				TE
FEE DETERMINATION O.I.P.E. CLASSIFIER FORMALITY REVIEW FESPONSE FORMALITY REVIEW FINE SPONSE FORMALITY				
<u> </u>	Rejected	N	Non-elected	
_ (Through num	eral). Canceled Restricted	A 0	Appeal Objected	
Claim Date	Clam	Date	Claim	Date
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If more than 150 claims or 10 actions staple additional sheet here